## PATENT APPLICATION FFF DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10791672

| _                                                            |                                      |                                                                      |                                  | 71 O                                 | ,                    |                                  | ~        |                                         |                        |                  |                                       |                          |
|--------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------------|----------------------------------|--------------------------------------|----------------------|----------------------------------|----------|-----------------------------------------|------------------------|------------------|---------------------------------------|--------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)               |                                      |                                                                      |                                  |                                      |                      |                                  | ••       | SMALL ENTITY TYPE                       |                        |                  | OTHER THAN<br>SMALL ENTITY            |                          |
| T                                                            | OTAL CLAIM                           | 11                                                                   |                                  |                                      |                      | F                                | ATE      | FEE                                     | 7                      | RATE             | FEE                                   |                          |
| F                                                            | OR                                   | NUMBER FILED                                                         |                                  | NUMBER EXTRA                         |                      | ВА                               | SIC FEE  | 385.00                                  | OR                     |                  | 770.00                                |                          |
| T                                                            | OTAL CHARGE                          | EABLE CLAIMS                                                         | 11 m                             | :<br>inus 20=                        | * (                  | ø                                |          | \$ 9=                                   |                        | OR               | 1040                                  |                          |
| IN                                                           | DEPENDENT (                          | 4 "                                                                  | ninus 3 =                        | *                                    | 1                    | ×                                | 43=      |                                         | OR                     | V00              | 86                                    |                          |
| М                                                            | ULTIPLE DEPE                         | ENDENT CLAIM F                                                       | PRESENT                          |                                      |                      |                                  |          | 45=                                     |                        | OR               |                                       | 100                      |
| * [                                                          | f the differenc                      | e in column 1 is                                                     | s less than z                    | ess than zero, enter "0" in column 2 |                      |                                  | <u> </u> | TAL                                     |                        | OR               | L                                     | 856                      |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |                                      |                                                                      |                                  |                                      |                      |                                  | ·        | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                        |                  |                                       |                          |
| AMENDMENT A                                                  |                                      | CLAIMS . REMAINING AFTER AMENDMENT                                   |                                  | HIGHI<br>NUME<br>PREVIO              | EST<br>BER<br>OUSLY  | PRESENT<br>EXTRA                 | R        | ATE                                     | ADDI-<br>TIONAL<br>FEE |                  | RATE                                  | . ADDI-<br>TIONAL<br>FEE |
| NDN                                                          | Total                                | *                                                                    | Minus                            | **                                   |                      | Ξ .                              | X        | 9=                                      |                        | OR               | X\$18=                                |                          |
| AME                                                          | Independent                          | *                                                                    | Minus                            | ***                                  | <u> </u>             | - <u> </u>                       | X        | 13=                                     |                        | OR               | X86=                                  |                          |
|                                                              | FIRST PRESI                          | ENTATION OF M                                                        | ULTIPLE DE                       | PENDENT                              | CLAIM                |                                  | +1       | 45=                                     |                        | OR               | +290=                                 |                          |
|                                                              |                                      |                                                                      |                                  |                                      |                      |                                  |          | OTAL<br>r. FEE                          |                        | 4 (              | TOTAL<br>ADDIT. FEE                   |                          |
|                                                              |                                      | (Column 1)                                                           |                                  | (Colum                               | n 2)                 | (Column 3)                       | 70011    |                                         |                        | <b>-4</b> '      | AOOH.Y EE                             |                          |
| AMENDMENT B                                                  |                                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                            |                                  | HIGHE<br>NUMB<br>PREVIO<br>PAID F    | IER<br>USLY.         | PRESENT<br>EXTRA                 | RA       | TΕ                                      | ADDI-<br>TIONAL<br>FEE |                  | RATE                                  | ADDI-<br>TIONAL<br>FEE   |
|                                                              | Total                                | *                                                                    | Minus                            | **                                   | ·                    | =                                | ×\$      | 9=                                      |                        | OR               | X\$18=                                |                          |
|                                                              | Independent                          | *                                                                    | Minus                            | ***                                  |                      | =                                | X4       | 3=                                      |                        | OR               | X86=                                  |                          |
| لِـ                                                          | FIRST PRESE                          | NTATION OF MU                                                        | JLTIPLE DEF                      | PENDENT                              | CLAIM                |                                  | +14      | 5=                                      |                        | OR               | +290=                                 |                          |
| ,                                                            |                                      |                                                                      | •                                |                                      |                      |                                  | IT       | OTAL                                    |                        | OB               | TOTAL                                 | <u> </u>                 |
|                                                              |                                      | (Column 1)                                                           |                                  | (Colum                               | n 2)                 | (Column 3)                       | ADDIT.   | . FEE L                                 |                        | , - · · <i>,</i> | ADDIT. FEE!                           |                          |
| MEN                                                          |                                      | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                            |                                  | HIGHE<br>NUMBI<br>PREVIOL<br>PAID FO | ST<br>ER<br>JSLY     | PRESENT<br>EXTRA                 | RAT      |                                         | ADDI-<br>IONAL<br>FEE  |                  | RATE                                  | ADDI-<br>TIONAL<br>FEE   |
|                                                              | Total .                              | *                                                                    | Minus                            | ##                                   |                      | =                                | X\$ '    | 9=                                      |                        | OR               | X\$18=                                |                          |
|                                                              | Independent                          |                                                                      | Minus                            | ***                                  |                      | =                                | X43      | =                                       | i                      | OR               | X86=                                  |                          |
|                                                              | FIRST PRESE                          | NTATION OF MU                                                        | LTIPLE DEP                       | TIPLE DEPENDENT C                    |                      |                                  |          |                                         |                        | ·                | · · · · · · · · · · · · · · · · · · · |                          |
| • 11 t                                                       | he entry in colum                    | nn 1 is less than the                                                | e entry in colum                 | nn:2. write "C                       | ,<br>in colu"(       | ımn 3.                           | +145     |                                         |                        | OR L             | +290=                                 |                          |
| *** [[ [                                                     | the "Highest Nun<br>the "Highest Nun | nber Previously Pain<br>nber Previously Pain<br>nber Previously Pain | d For" IN THIS<br>d For" IN THIS | SPACE is It                          | ess than<br>ess than | 20, enter "20,"<br>3, enter "3." | ADDIT. I |                                         | ·                      |                  | TOTAL<br>DDIT. FEE<br>nn 1.           |                          |